



032 9/25/95

#3

October 20, 1995

Box Missing Part
COMMISSIONER OF PATENTS
AND TRADEMARKS
Washington, D.C. 20231

Re: U.S. Patent Application Serial No. 08/517,901
Title: WOUND THERAPY DEVICE AND RELATED
METHODS
Our Ref.: 06 2916.312

Dear Sir:

Enclosed herewith for filing in the above-referenced application are the following:

1. Original Declaration and Power of Attorney;
2. Notice To File Missing Parts of Application;
3. Check in the amount of \$130.00; and
4. An acknowledgment postcard.

The Commissioner is hereby authorized to charge the \$76.00 fee required fee for Notice Item No. 2, and /or any missing or insufficient fees which may be required to Deposit Account No. 01-0477. A duplicate copy of this letter is enclosed.

Very truly yours,

KINETIC CONCEPTS, INC.

By:

William H. Quirk, IV
Reg. No. 33,996

WHQ:ddb
Enclosures

c:\patent\pto.doc

cc: C. Hanor

EXPRESS MAIL

RB732457858

Date of Deposit 10-20 19 95

I hereby certify that this paper or fee is being
deposited with the United States Postal Service "Express"
Mail Post Office to Addressee service under 37 CFR
10 on the date indicated above and is addressed to the
Commissioner of Patents and Trademarks, Washington,
D.C. 20231



120-100 713 A/N
UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
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08/517,901 08/22/95 LINA C 08-2916.312

0242/9925

KINETIC CONCEPTS INC
PO BOX 659508
SAN ANTONIO TX 78265-9508

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DATE MAILED:

09/25/95

NOTICE TO FILE MISSING PARTS OF APPLICATION FILING DATE GRANTED

An Application Number and Filing Date have been assigned to this application. However, the items indicated below are missing. The required items and fees identified below must be timely submitted **ALONG WITH THE PAYMENT OF A SURCHARGE** for items 1 and 3-6 only of \$ 130 for large entities or \$ 65 for small entities who have filed a verified statement claiming such status. The surcharge is set forth in 37 CFR 1.16(e).

If all required items on this form are filed within the period set below, the total amount owed by applicant as a ☒ large entity, ☐ small entity (verified statement filed), is \$ 206.

Applicant is given **ONE MONTH FROM THE DATE OF THIS LETTER, OR TWO MONTHS FROM THE FILING DATE** of this application, **WHICHEVER IS LATER**, within which to file all required items and pay any fees required above to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

1. ☐ The statutory basic filing fee is: ☐ missing ☐ insufficient. Applicant as a ☐ large entity ☐ small entity, must submit \$ _____ to complete the basic filing fee.

2. ☒ Additional claim fees of \$ 76 as a ☒ large entity, ☐ small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

3. ☒ The oath or declaration:

☐ is missing.

☐ does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date is required.

4. ☐ The oath or declaration does not identify the application to which it applies. An oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. ☐ The signature(s) to the oath or declaration is/are: ☐ missing; ☐ by a person other than the inventor or a person qualified under 37 CFR 1.42, 1.43, or 1.47. A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

6. ☒ The signature of the following joint inventor(s) is missing from the oath or declaration:

_____ An oath or declaration listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

7. ☐ The application was filed in a language other than English. Applicant must file a verified English translation of the application and a fee of \$ _____ under 37 CFR 1.17(k), unless this fee has already been paid.

8. ☐ A \$ _____ processing fee is required since your check was returned without payment. (37 CFR 1.21(m)).

9. ☐ Your filing receipt was mailed in error because your check was returned without payment.

10. ☐ The application does not comply with the Sequence Rules. See attached Notice to Comply with Sequence Rules 37 CFR 1.821-1.825.

11. ☐ Other. SE18077 03/11/96 08517901 01-0477 180 102 2.00CR

Direct the response to Box Missing Part and refer any questions to the Customer Service Center

at (703) 801-0222. 11/09/95 08517901

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1 105 130.00 CK

78.00CH

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A copy of this notice MUST be returned with the response.